Office of Clinical and Preventive Services
Division of Clinical and Community Services

2019
NATIONAL CLINICAL & COMMUNITY-BASED SERVICES
CONFERENCE

casey family programs

Using data to plan prevention/ interventions

CAPT Christopher Lamer, PharmD, MHS, BCPS, CDE

Director of Pharmacovigilance

National Pharmacy and Therapeutics Committee

Objectives

- Data can be a powerful resource to help you predict or identify patients in need of healthcare-related assistance.
- Objectives:
  1. Demonstrate how adverse reaction reporting can help protect other patients who may be at similar risk.
  2. Identify additional types of data that can be used to promote health and safety.
  3. Identify, share, and discuss ideas or examples of ways in which you have used data to improve the lives of our patients.

Why do we need data?

Measures, tools, and reports

GPRA

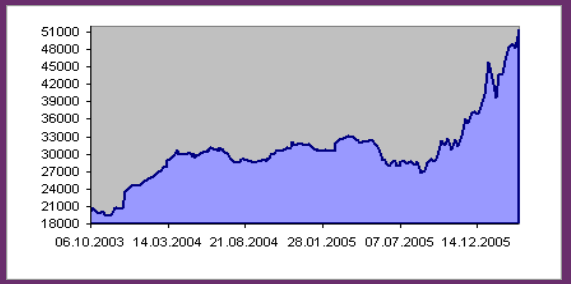
Government Performance and Results **Act**

Appropriated Dollars

Activities

Consistent with Agency Goals

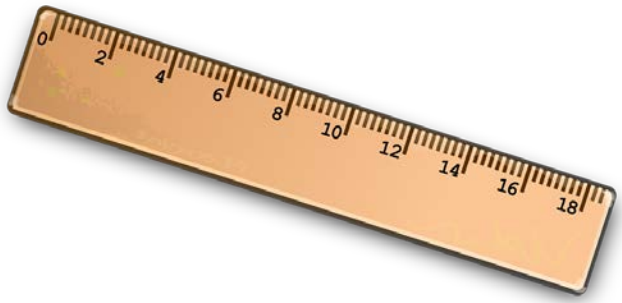
Customer benefits or outcomes



Return on Investment

GPRA

Measure



Immunizations:
Influenza 6mo – 17yr

Tool

Clinical Reporting System (CRS)

Report

GPRA Report to Congress

Definitions: Measures

- Measures
  - What we want to look at
    - Shows if things are working they way you think they are
    - Shows if an intervention makes things better (or worse)

Measures

$$\frac{\text{Numerator}}{\text{Denominator}}$$

Measures: Denominator

Denominator

People who came to diabetes clinic this year

People with diabetes and high blood pressure

People who live in the community

Measures: Numerator

People with A1C < 8

People who were received nutrition education

People with a dental visit

Numerator

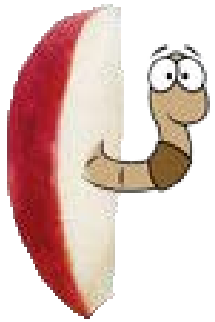
Denominator

Measures: Exceptions

Numerator

Denominator

Exclusions



People who are <18 years

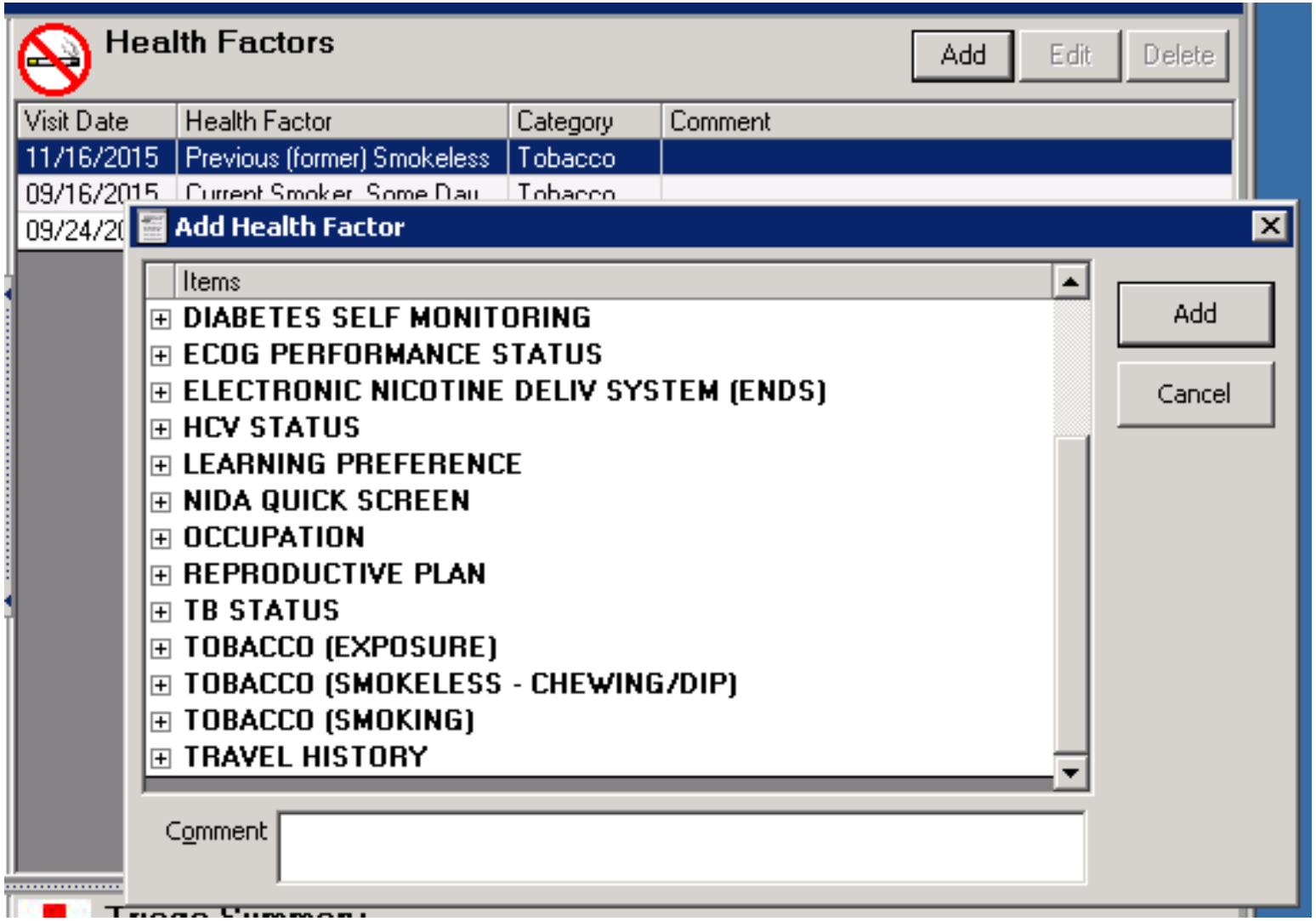
People who also have hypertension

People who live outside the community

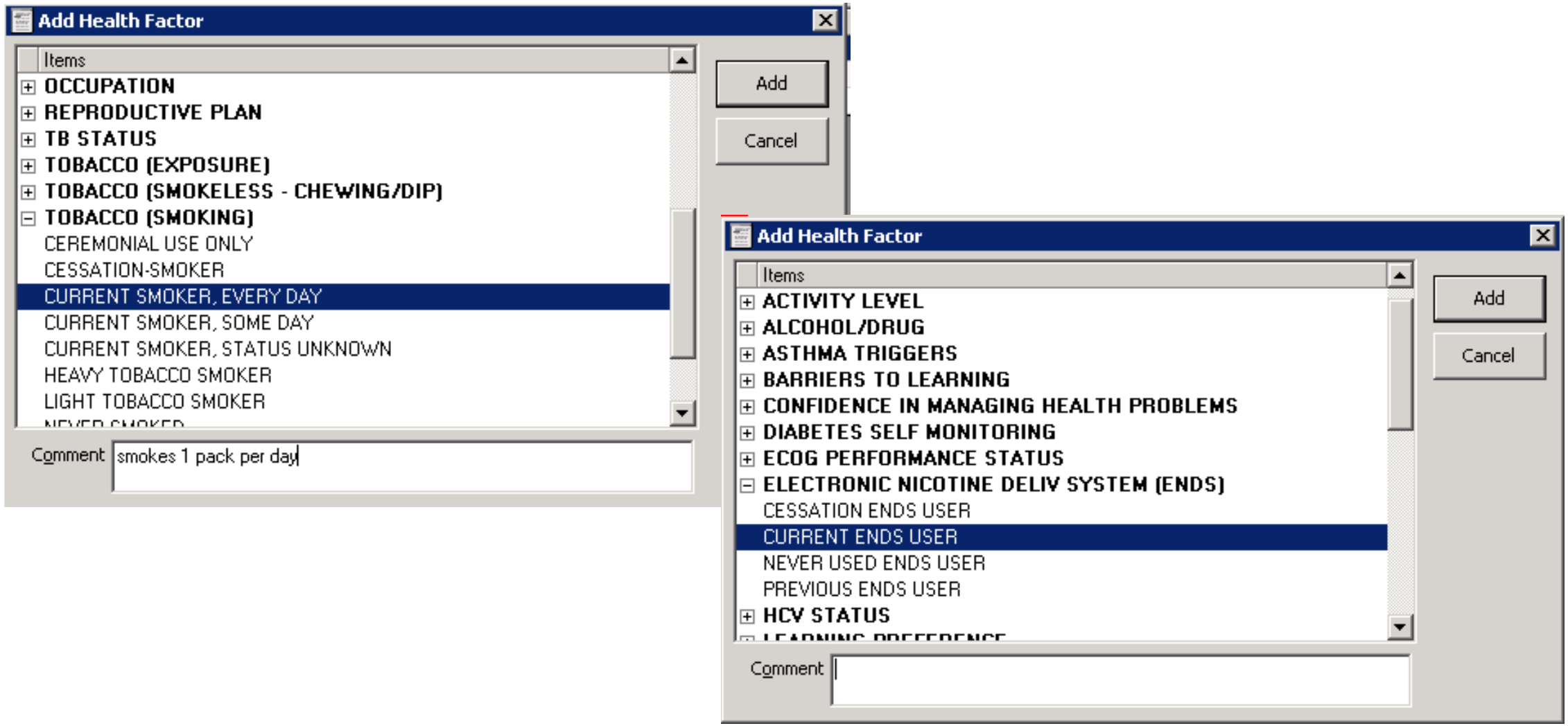
Reports are only as good as the data you enter

Types of data

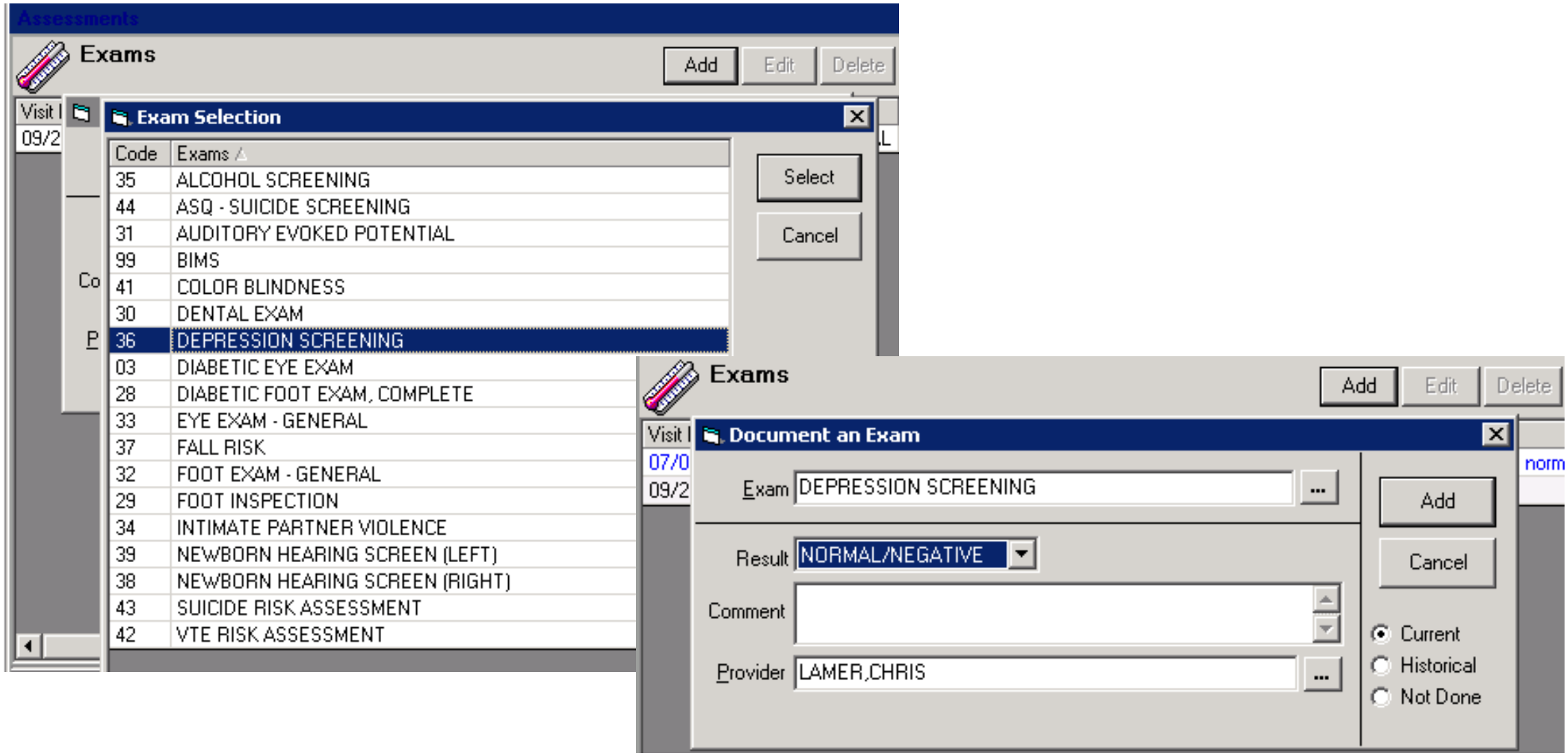
Health factors



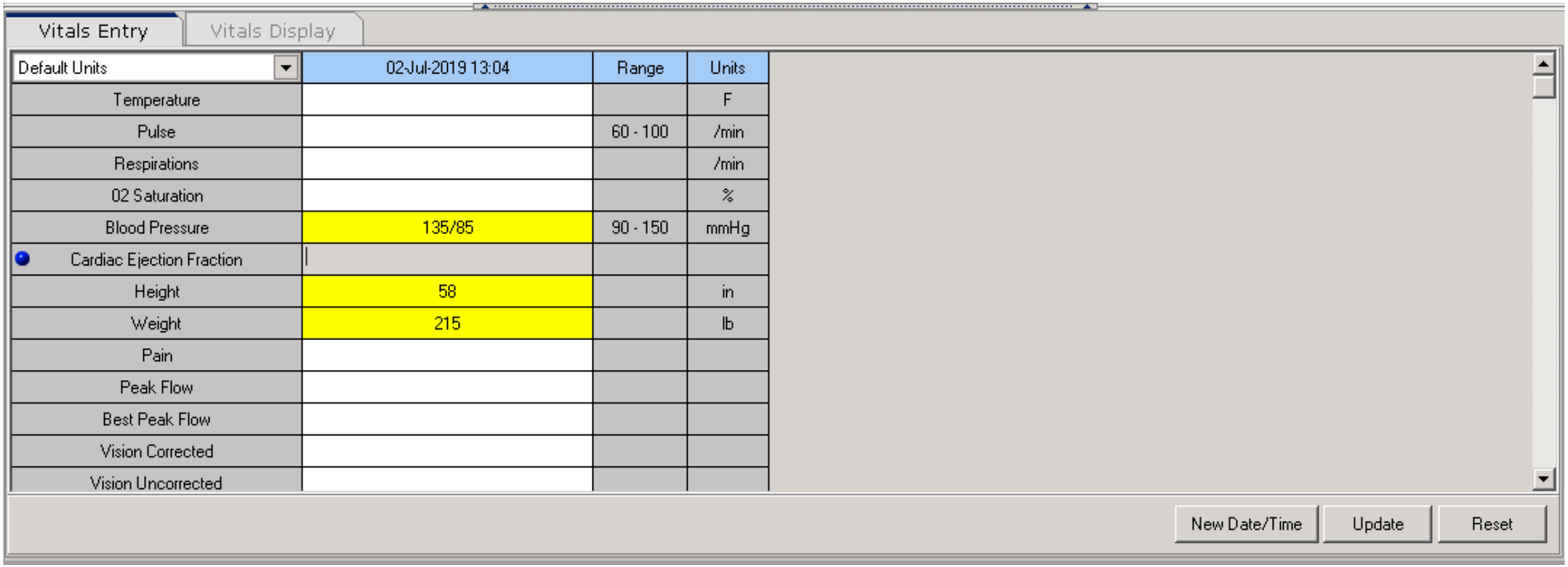
Health factors



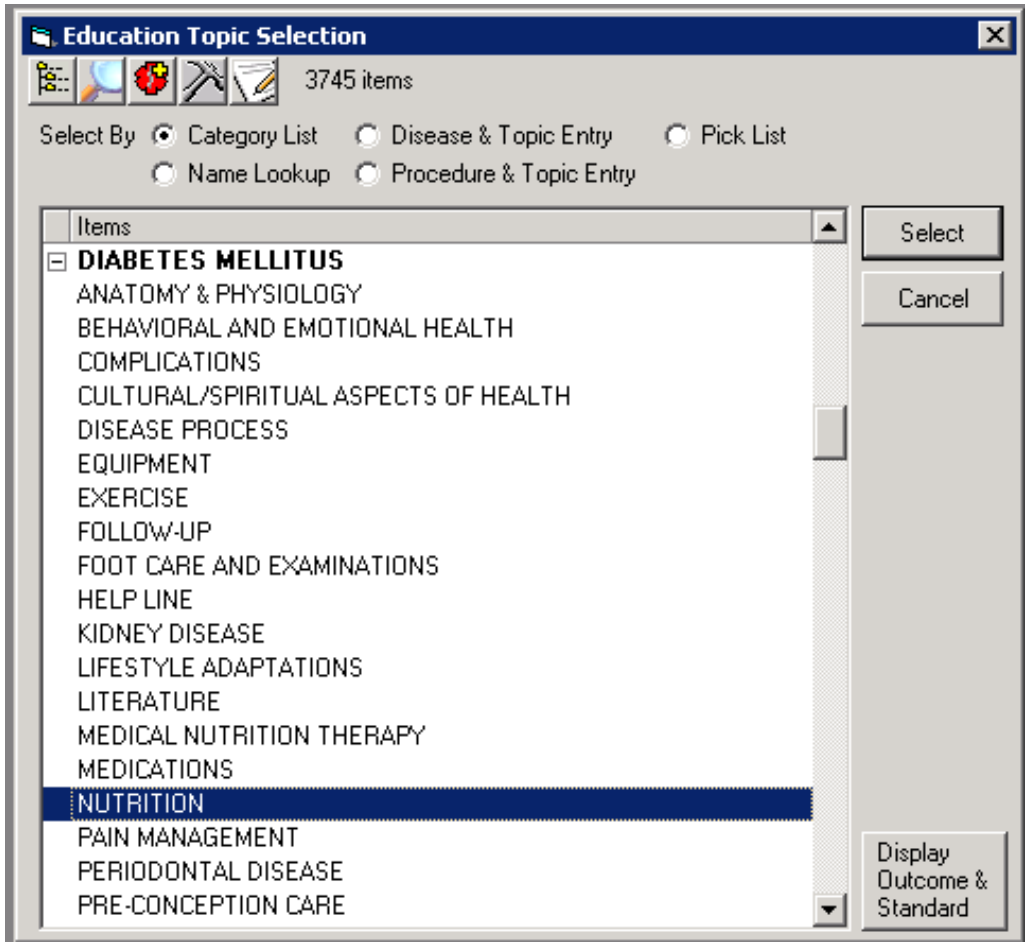
Exam Codes

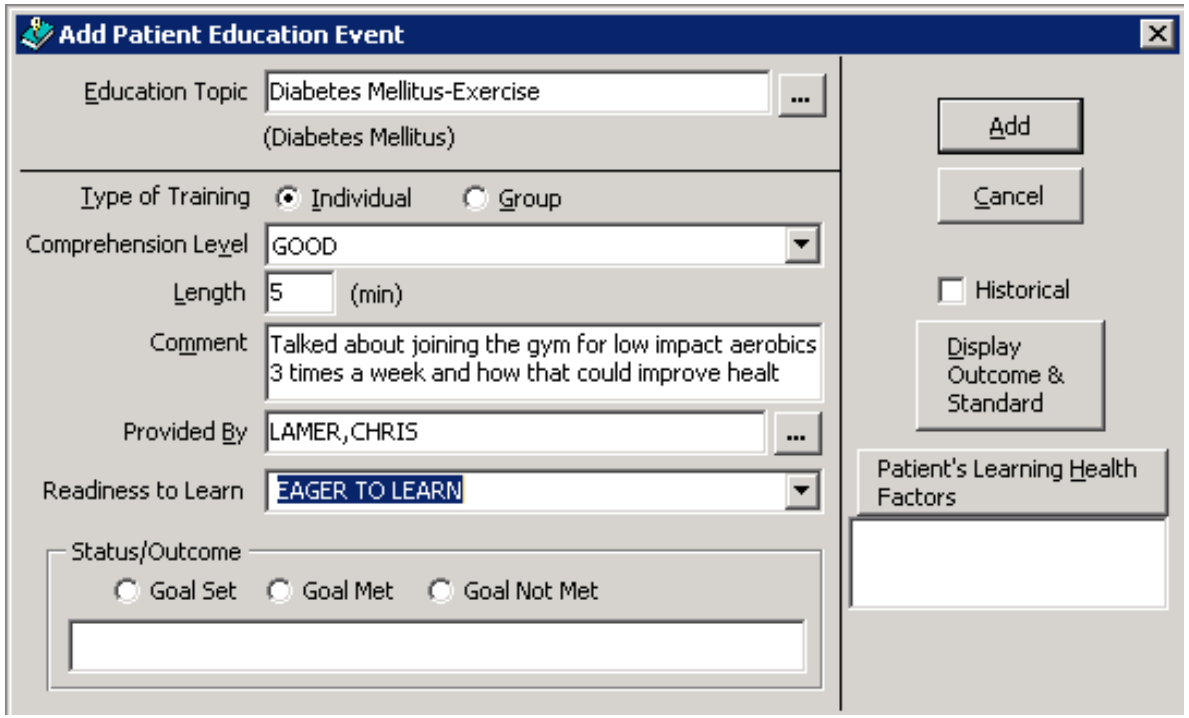

Assessments
Exams
Add
Edit
Delete
Exam Selection
Code
Exams
35 ALCOHOL SCREENING
44 ASQ - SUICIDE SCREENING
31 AUDITORY EVOKED POTENTIAL
99 BIMS
41 COLOR BLINDNESS
30 DENTAL EXAM
36 DEPRESSION SCREENING
03 DIABETIC EYE EXAM
28 DIABETIC FOOT EXAM, COMPLETE
33 EYE EXAM - GENERAL
37 FALL RISK
32 FOOT EXAM - GENERAL
29 FOOT INSPECTION
34 INTIMATE PARTNER VIOLENCE
39 NEWBORN HEARING SCREEN (LEFT)
38 NEWBORN HEARING SCREEN (RIGHT)
43 SUICIDE RISK ASSESSMENT
42 VTE RISK ASSESSMENT
Select
Cancel
Exams
Add
Edit
Delete
Document an Exam
Exam DEPRESSION SCREENING
Result NORMAL/NEGATIVE
Comment
Provider LAMER,CHRIS
Add
Cancel
Current
Historical
Not Done

Vital Signs & Measurements

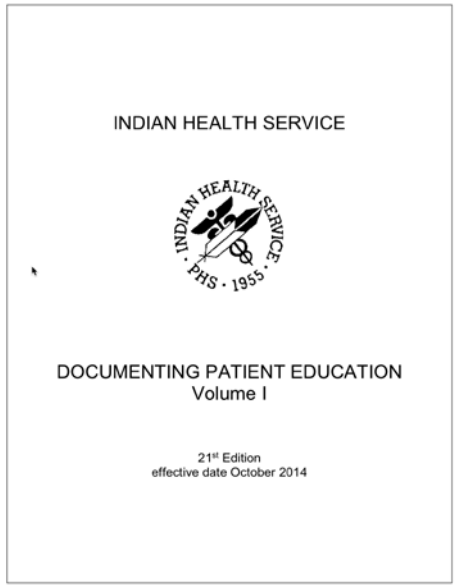


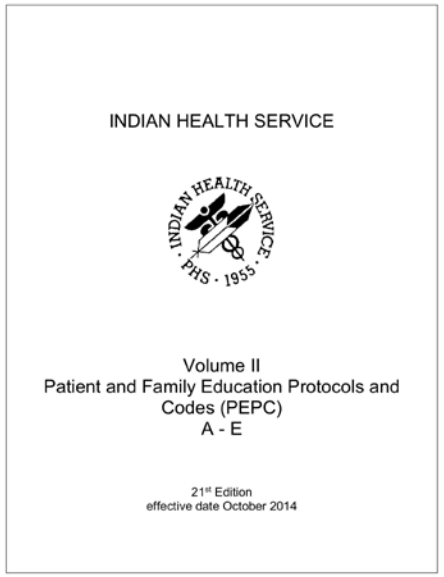
Patient Education

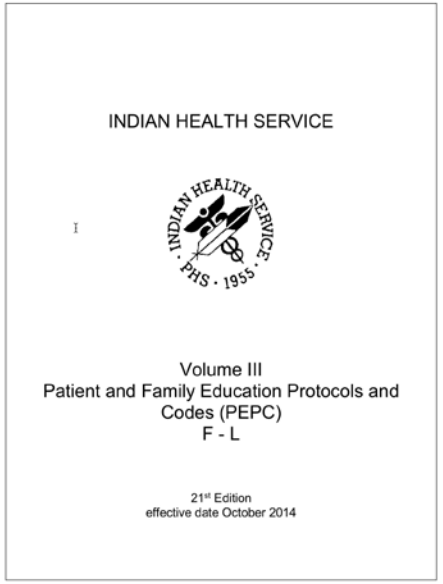


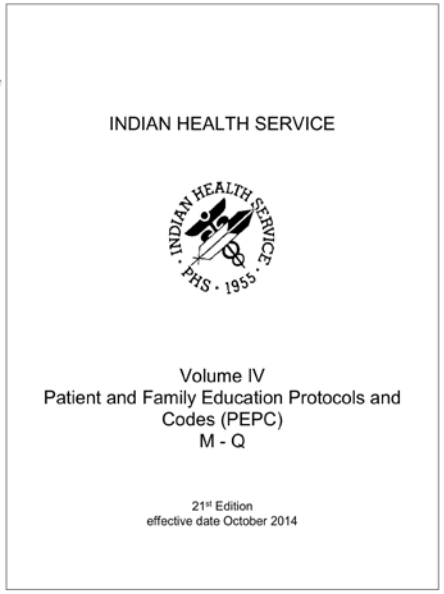


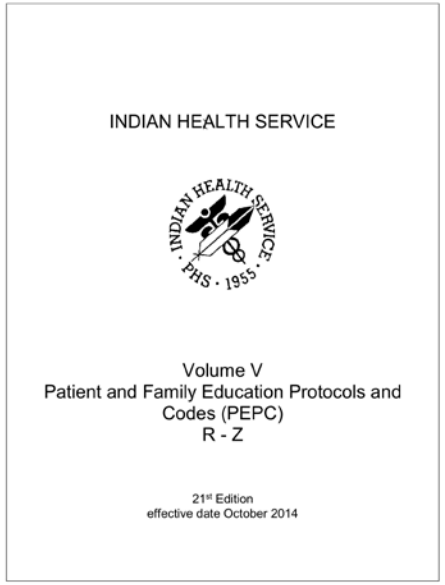
Patient education



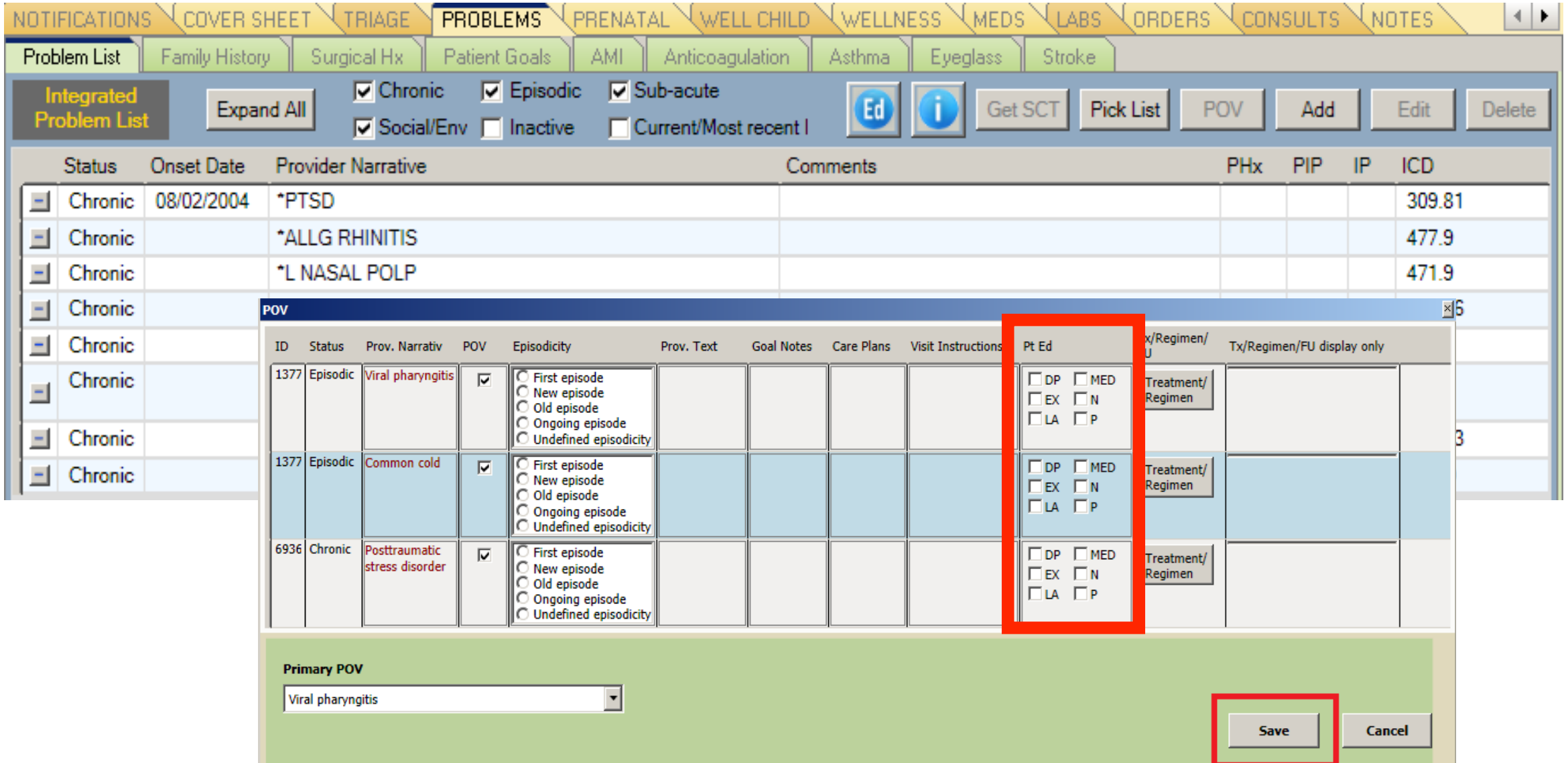




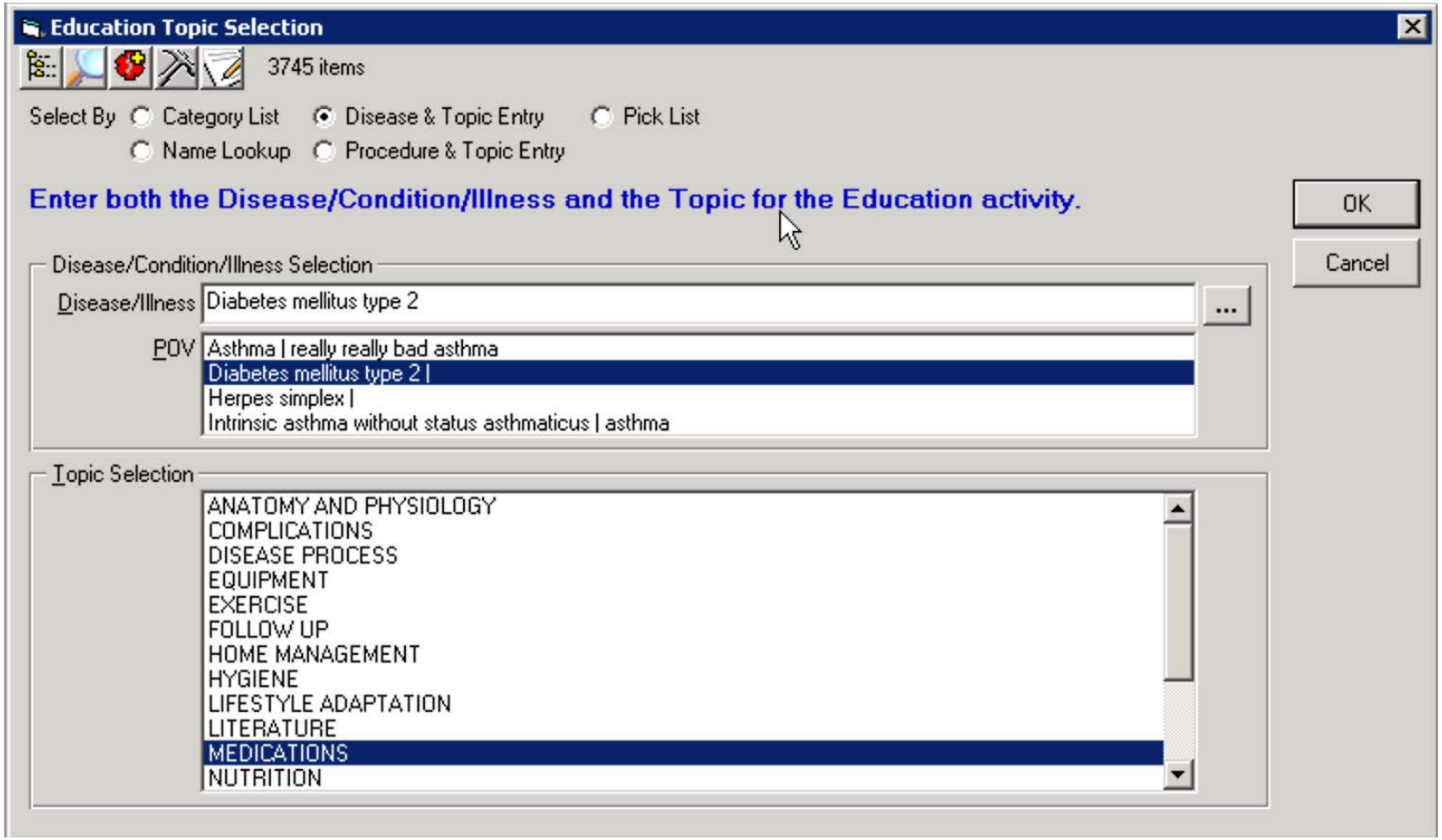




Integrated problem list



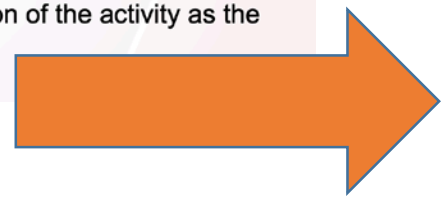
Education Component using the Problem List



Updating the topics

- Updated general subtopics
- Identified SNOMED codes that are associated with subtopics so other EHR systems can map to our education code process.
- Removed outcomes and standards and made code descriptions more simplistic.

- **EX – EXERCISE**
- OUTCOME: The patient/family will understand the role of physical activity in the patient's disease process or condition.
- STANDARDS:
  1. Discuss the medical clearance issues for physical activity.
  2. Discuss the benefits of any exercise, such as improvement in well-being, stress reduction, sleep, bowel regulation, and self-image.
  3. Discuss the obstacles to a personal physical activity plan and the solutions to those obstacles. Assist the patient in developing a personal physical activity plan.
  4. Encourage the patient to increase the intensity and duration of the activity as the patient becomes more fit, as appropriate.
  5. Refer to community resources as appropriate.



EX – EXERCISE (304507003)

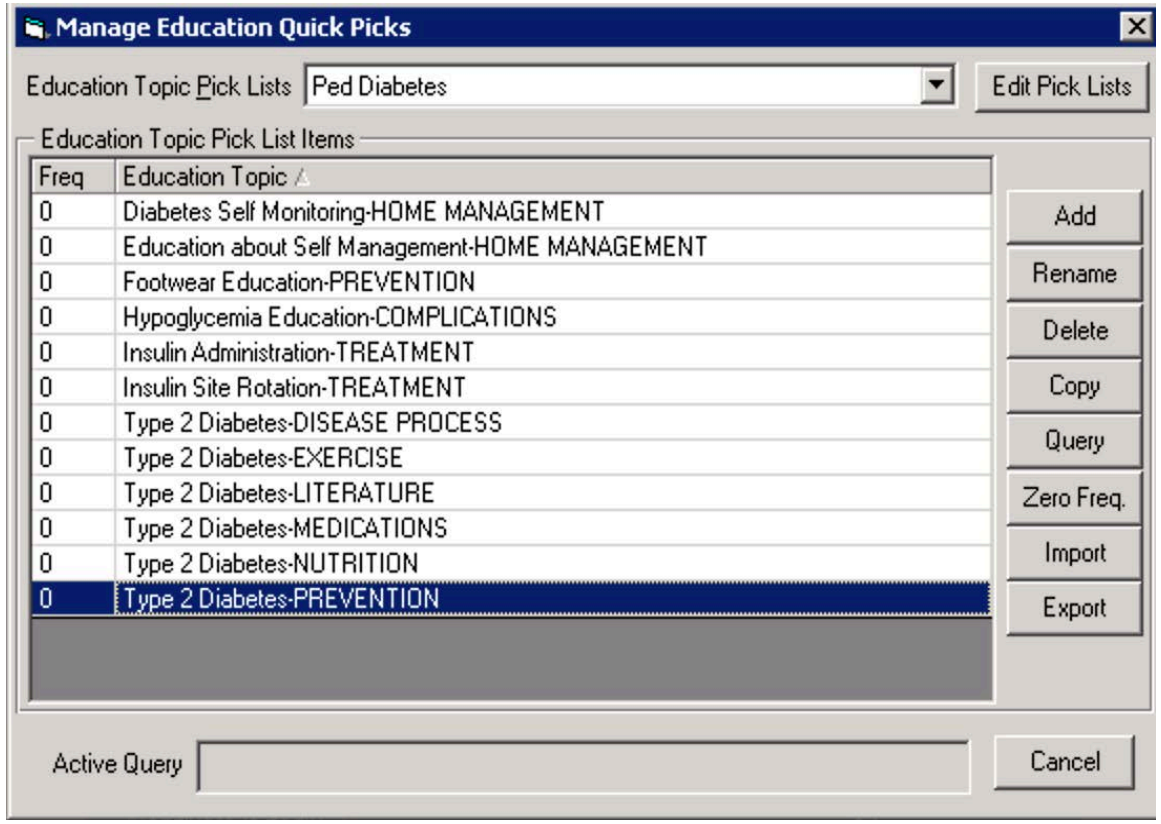
Use this code to document education about the about the role of physical activity in the patient's disease process or condition to the patient/care giver.

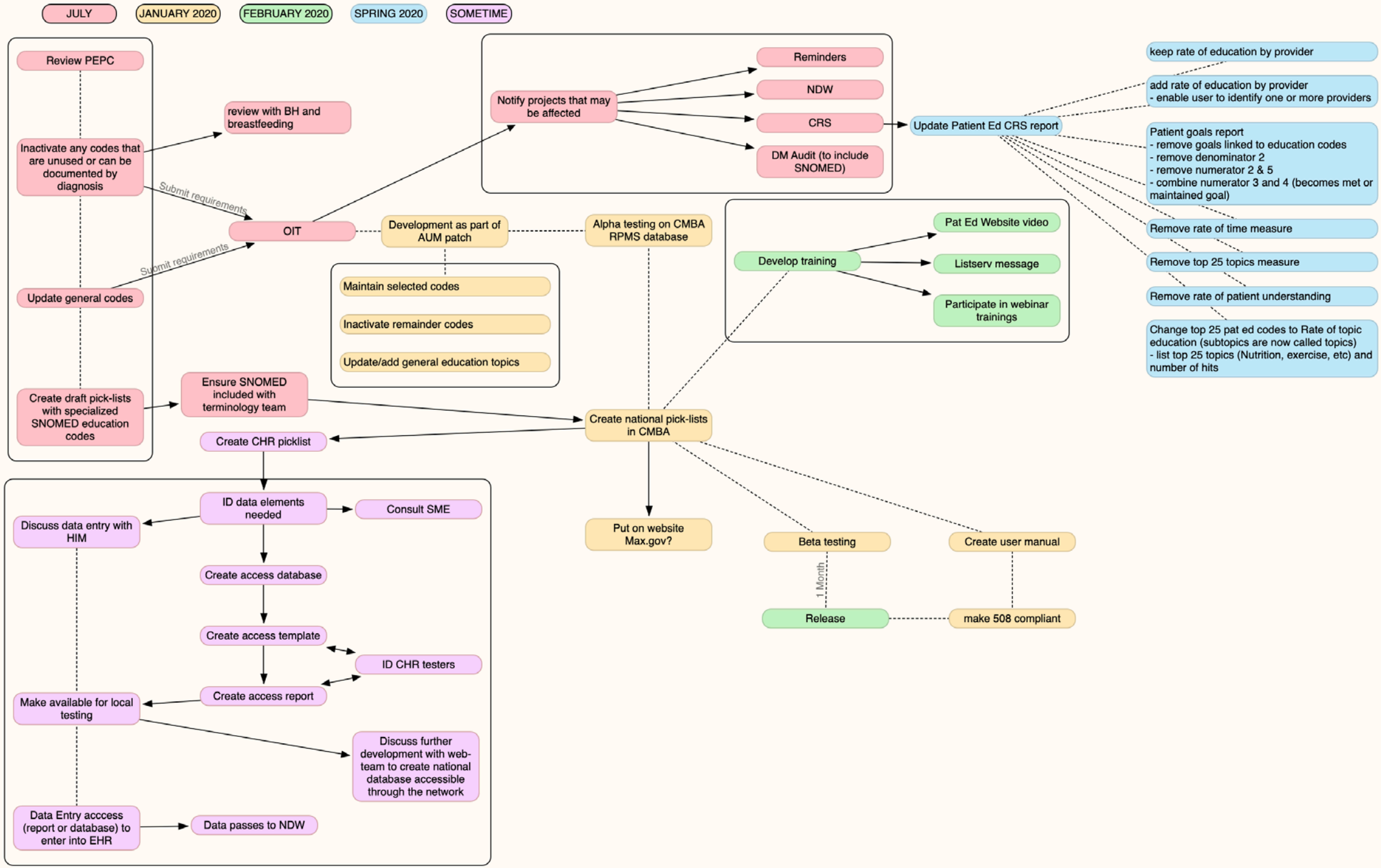
Education can include information such as:

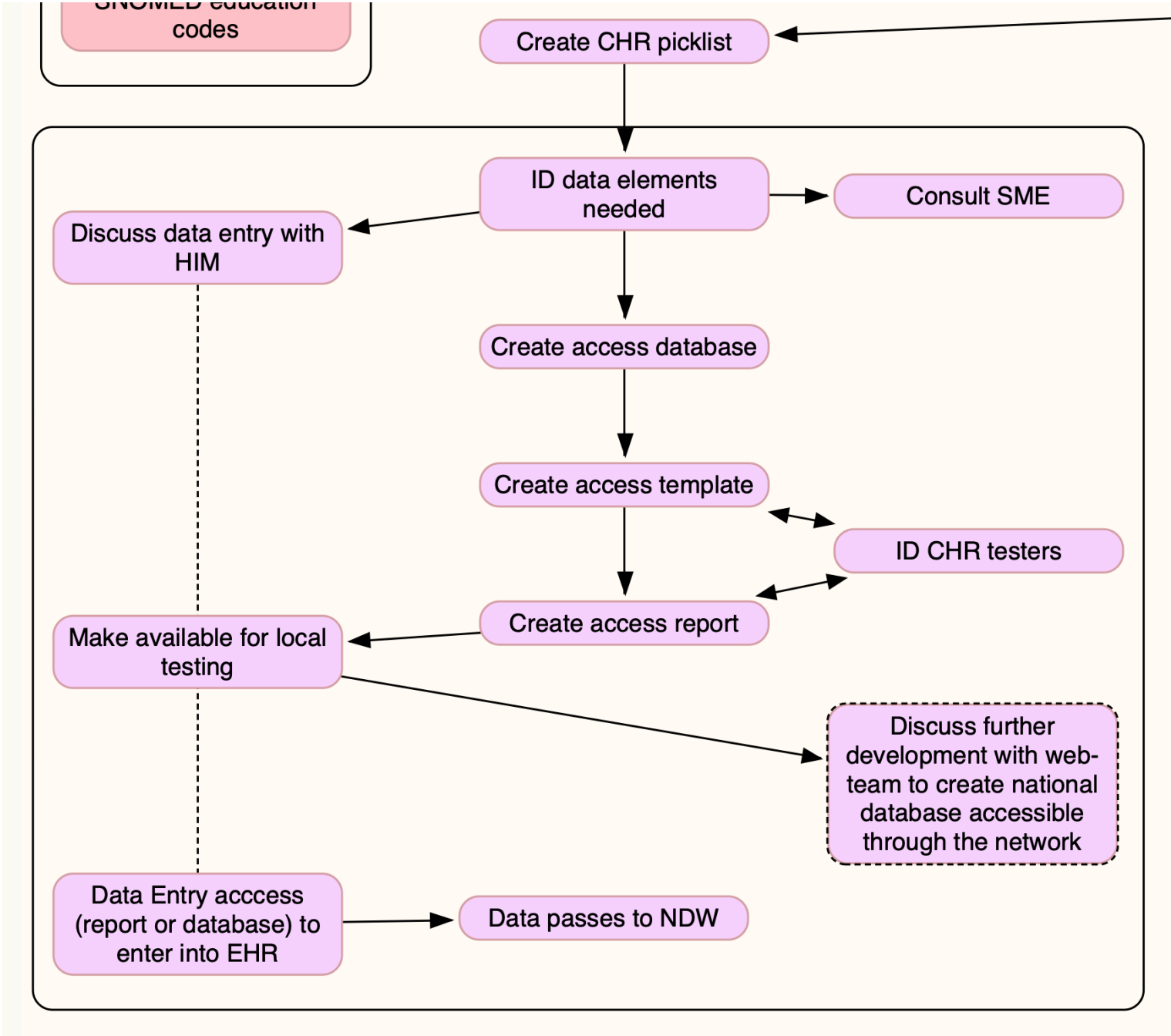
- Benefits of physical activity.
- Developing a physical activity plan.
- Community resources.
- Medical clearance for physical activity as appropriate.

pick lists

- Pick-lists can be created and shared nationally.
- Pick-lists can contain:
  - Specific SNOMED education codes
  - Generic education codes




JULY
JANUARY 2020
FEBRUARY 2020
SPRING 2020
SOMETIME
Review PEPC
Inactivate any codes that are unused or can be documented by diagnosis
review with BH and breastfeeding
Submit requirements
Update general codes
Submit requirements
OIT
Create draft pick-lists with specialized SNOMED education codes
Ensure SNOMED included with terminology team
Create CHR picklist
Development as part of AUM patch
Alpha testing on CMBA RPMS database
Maintain selected codes
Inactivate remainder codes
Update/add general education topics
Notify projects that may be affected
Reminders
NDW
CRS
DM Audit (to include SNOMED)
Update Patient Ed CRS report
keep rate of education by provider
add rate of education by provider
- enable user to identify one or more providers
Patient goals report
- remove goals linked to education codes
- remove denominator 2
- remove numerator 2 & 5
- combine numerator 3 and 4 (becomes met or maintained goal)
Remove rate of time measure
Remove top 25 topics measure
Remove rate of patient understanding
Change top 25 pat ed codes to Rate of topic education (subtopics are now called topics)
- list top 25 topics (Nutrition, exercise, etc) and number of hits
Develop training
Pat Ed Website video
Listserv message
Participate in webinar trainings
Create national pick-lists in CMBA
Put on website Max.gov?
Beta testing
1 Month
Release
Create user manual
make 508 compliant
ID data elements needed
Consult SME
Discuss data entry with HIM
Create access database
Create access template
ID CHR testers
Create access report
Make available for local testing
Discuss further development with web-team to create national database accessible through the network
Data Entry acccess (report or database) to enter into EHR
Data passes to NDW


codes
Create CHR picklist
ID data elements needed
Consult SME
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Create access report
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Discuss further development with web-team to create national database accessible through the network
Data Entry acccess (report or database) to enter into EHR
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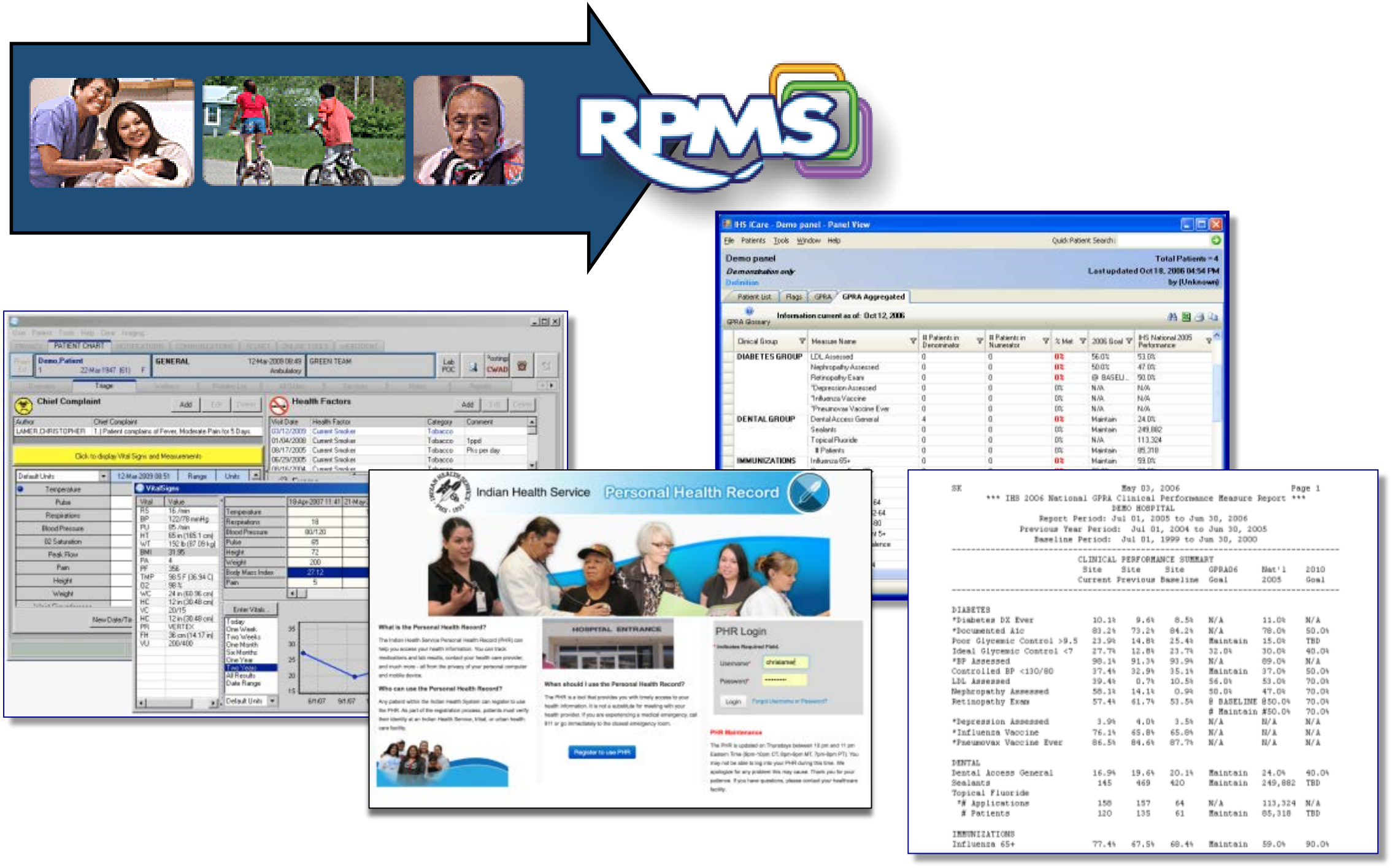
Definitions: Tools

- What we use to calculate measures


RPMS
IHS iCare - Demo panel - Panel View
Demo panel
Demonstration only
Total Patients = 4
Last updated Oct 18, 2006 04:54 PM
by (Unknown)
Patient List
Flags
GPRA
GPRA Aggregated
GPRA Glossary
Information current as of: Oct 12, 2006
Clinical Group
Measure Name
DIABETES GROUP
DENTAL GROUP
IMMUNIZATIONS
Indian Health Service
Personal Health Record
What is the Personal Health Record?
Who can use the Personal Health Record?
When should I use the Personal Health Record?
HOSPITAL ENTRANCE
PHR Login
Register to use PHR
SK
May 03, 2006
Page 1
*** IHS 2006 National GPRA Clinical Performance Measure Report ***
DEMO HOSPITAL
Report Period: Jul 01, 2005 to Jun 30, 2006
Previous Year Period: Jul 01, 2004 to Jun 30, 2005
Baseline Period: Jul 01, 1999 to Jun 30, 2000
CLINICAL PERFORMANCE SUMMARY
Site Current
Site Previous
Site Baseline
GPRA06 Goal
Nat'l 2005
2010 Goal
DIABETES
*Diabetes DX Ever 10.1% 9.6% 8.5% N/A 11.0% N/A
*Documented A1c 83.2% 73.2% 84.2% N/A 78.0% 50.0%
Poor Glycemic Control >9.5 23.9% 14.8% 25.4% Maintain 15.0% TBD
Ideal Glycemic Control <7 27.7% 12.8% 23.7% 32.0% 30.0% 40.0%
*BP Assessed 98.1% 91.3% 93.9% N/A 89.0% N/A
Controlled BP <130/80 37.4% 32.9% 35.1% Maintain 37.0% 50.0%
LDL Assessed 39.4% 0.7% 10.5% 56.0% 53.0% 70.0%
Nephropathy Assessed 58.1% 14.1% 0.9% 50.0% 47.0% 70.0%
Retinopathy Exam 57.4% 61.7% 53.5% @ BASELINE @50.0% 70.0%
Maintain #50.0% 70.0%
*Depression Assessed 3.9% 4.0% 3.5% N/A N/A N/A
*Influenza Vaccine 76.1% 65.8% 65.8% N/A N/A N/A
*Pneumovax Vaccine Ever 86.5% 84.6% 87.7% N/A N/A N/A
DENTAL
Dental Access General 16.9% 19.6% 20.1% Maintain 24.0% 40.0%
Sealants 145 469 420 Maintain 249,882 TBD
Topical Fluoride
*# Applications 158 157 64 N/A 113,324 N/A
Patients 120 135 61 Maintain 65,318 TBD
IMMUNIZATIONS
Influenza 65+ 77.4% 67.5% 68.4% Maintain 59.0% 90.0%

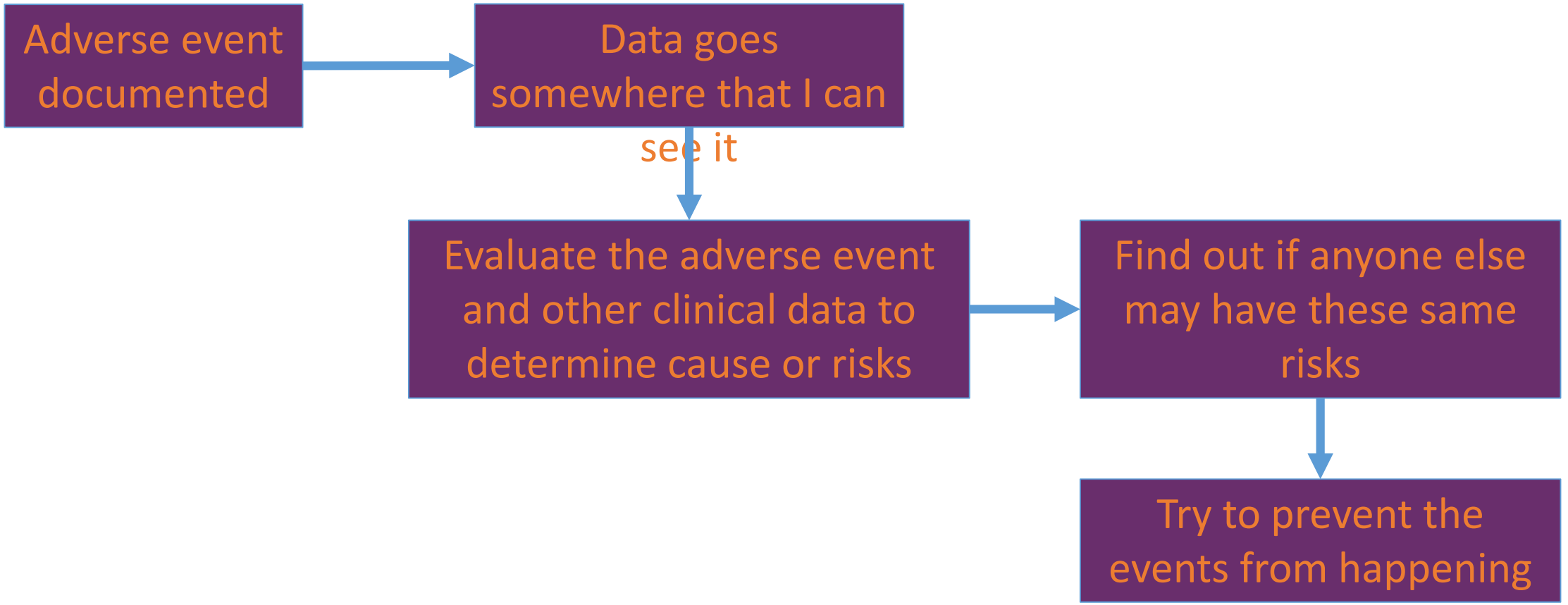
PHARMACOVIGILANCE

- **World Health Organization (WHO) definition:** the science and activities relating to the detection, assessment, understanding, and prevention of adverse effects or any other drug-related problem.

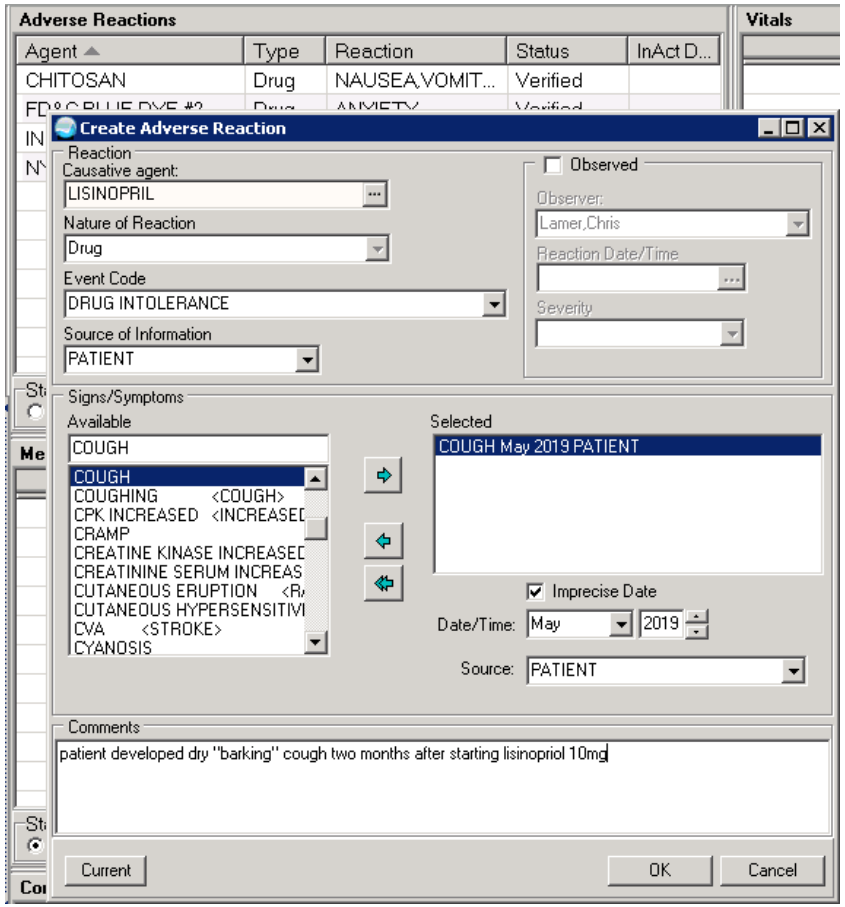
What do I want to achieve?

- I want to know what adverse events are occurring
- I want to know if there are reasons they are happening
- I want to know if there is something to prevent them

How would I do this?

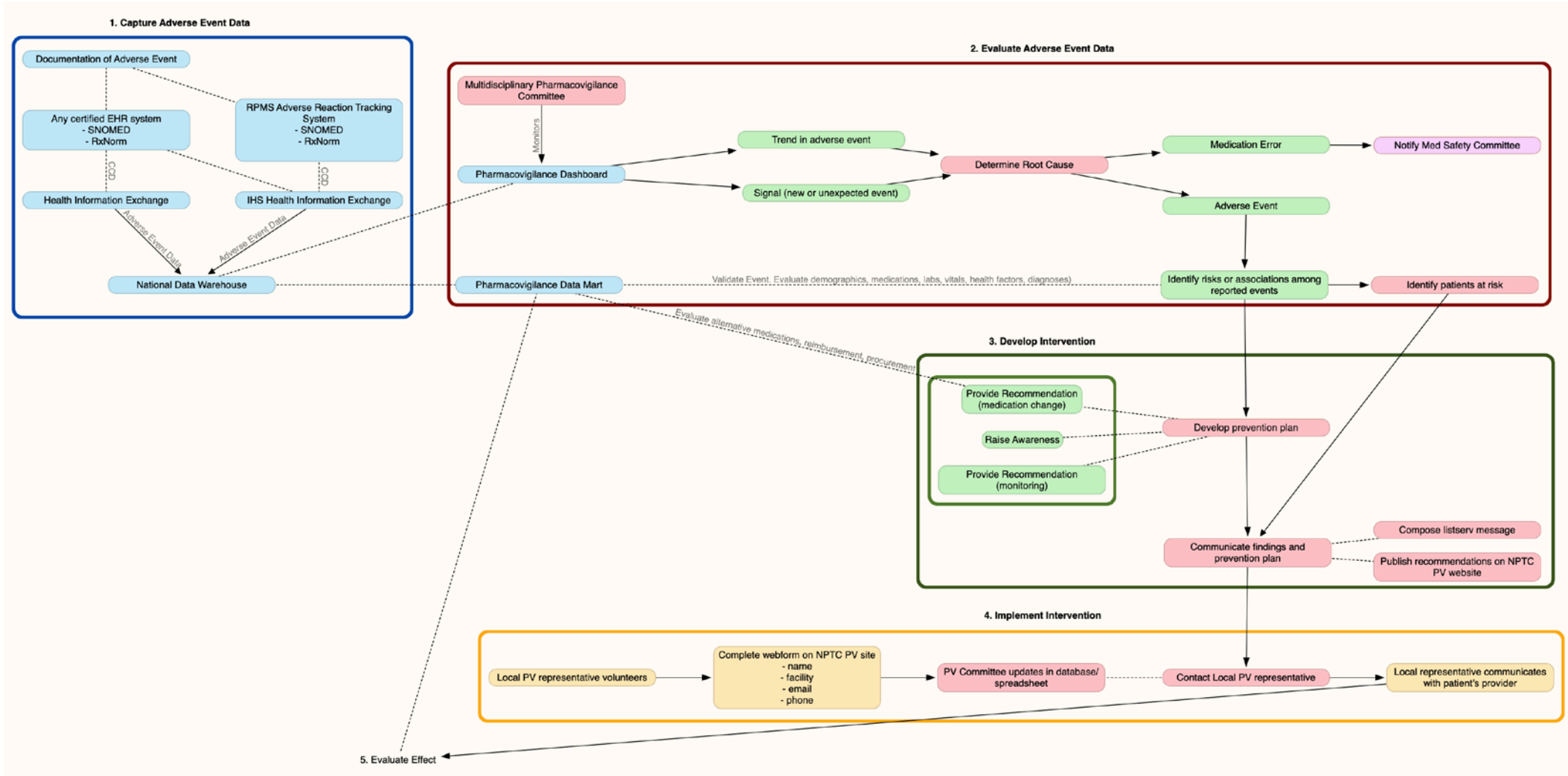


What do I know NOW?
What data do I have now?



- Where is it? Electronic Health Records
- Who enters it? Clinicians
- Are there limitations?
  - Causes a justification – many not use for mild or moderate events
- Where does it go? Health Information Exchange

How do I get the data?


1. Capture Adverse Event Data
Documentation of Adverse Event
Any certified EHR system
- SNOMED
- RxNorm
RPMS Adverse Reaction Tracking System
- SNOMED
- RxNorm
CCD
CCD
Health Information Exchange
IHS Health Information Exchange
Adverse Event Data
Adverse Event Data
National Data Warehouse
2. Evaluate Adverse Event Data
Multidisciplinary Pharmacovigilance Committee
Monitors
Pharmacovigilance Dashboard
Trend in adverse event
Signal (new or unexpected event)
Determine Root Cause
Medication Error
Notify Med Safety Committee
Adverse Event
Pharmacovigilance Data Mart
Validate Event. Evaluate demographics, medications, labs, vitals, health factors, diagnoses)
Identify risks or associations among reported events
Identify patients at risk
Evaluate alternative medications, reimbursement, procurement
3. Develop Intervention
Provide Recommendation (medication change)
Raise Awareness
Provide Recommendation (monitoring)
Develop prevention plan
Compose listserv message
Communicate findings and prevention plan
Publish recommendations on NPTC PV website
4. Implement Intervention
Local PV representative volunteers
Complete webform on NPTC PV site
- name
- facility
- email
- phone
PV Committee updates in database/ spreadsheet
Contact Local PV representative
Local representative communicates with patient's provider
5. Evaluate Effect

What kinds of information do you want to know about?

- What questions are you trying to answer?
- What are your goals in answering the question?
  - SMART (specific, measurable, achievable, relevant, and time-based)
- What data do you need?
  - Where will it come from?
  - How will you get it?
- Are there any barriers?

Thank you